Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid CMB control number							
Effective on 12/08	-	Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			. 77		10/553,424-Conf. #1484		
FEE TRANSMITTAL			· ming court		October 18, 2005		
For FY 2009			T HOL TELLITOR HIT OFFICE		Masashi TAMURA		
			Examiner Name		M. A. Newman		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	2624			
TOTAL AMOUNT OF PAYMENT (\$) 180.00			Attorney Docket No.		1163-0536PUS1		
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
X   Deposit Account   Deposit Account Number: 02-2448   Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
F	LING FEES	SEA	RCH FEES	EXAMI	NATION FEES		
Application Type Fee (S	Small Entity ) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	Paid (\$)
Utility 330	165	540	270	220	110	1.22	
Design 220	110	100	50	140	70		
Plant 220	110	330	165	170	85		
Reissue 330	165	540	270	650	325		
71110000		0	0	030	0		
Provisional 220	110	0	U	U	U		
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)							
Fee Description Each claim over 20 (including Reissues)						52	26
Each independent claim over 3 (including Reissues)						220	110
Multiple dependent claims				390	195		
Total Claims Extra Claims Fee (\$) Fe			e Paid (\$)		Multiple Depend	ent Claims	
8 - 20 or HP x =				Ē	ee (\$)	ee Paid (\$	3
HP = highest number of total claims paid fo	, if greater than 20.						_
Indep. Claims Extra Claim	Indep. Claims Extra Claims Fee (\$) F			ee Paid (\$)			_
33 or HP =	x =						
HP ≈ highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
-100 = /50 =(round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00							
SUBMITTED BY							
Signature	Mu #5	375	Registration No. (Attorney/Agent)	40,439	Telephone	(703) 20	5-8035
Name (Print/Type D. Richard Anderson Date October 19, 2009							